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CONFIRMATION NO. 9911

SERIAL NUMBER 10/056,734	FILING OR 371(c) DATE 01/25/2002 RULE	CLASS 424	GROUP ART UNIT 1639	ATTORNEY DOCKET NO. 0594.00034
APPLICANTS A. Robert Spitzer, Southfield, MI; <i>SV</i>				
** CONTINUING DATA ***** This appln claims benefit of 60/264,413 01/26/2001 and claims benefit of 60/302,799 07/03/2001 <i>512.</i>				
** FOREIGN APPLICATIONS ***** <i>NONB</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 02/21/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		STATE OR COUNTRY MI	SHEETS DRAWING 3	TOTAL CLAIMS 32 INDEPENDENT CLAIMS 5
ADDRESS 48924				
TITLE System and method for rectal administration of medication for treatment of migraines				
FILING FEE RECEIVED 627	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	